Docket No.: 50023-148

## **PATENT**

## S PATENT AND TRADEMARK OFFICE

In re Application of

Customer Number: 20277

Eiji UEDA

Confirmation Number: 2857

Application No.: 09/939,789

Group Art Unit: 2611

Filed: August 28, 2001

Examiner: A. Faile

For: RECEIVING DEVICE, DATA BROADCAST RECEIVING SYSTEM, CONTENT

ACCESSING METHOD, AND PROGRAM THEREOF

## INFORMATION DISCLOSURE STATEMENT

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

In accordance with the provisions of 37 C.F.R. 1.56, 1.97 and 1.98, the attention of the Patent and Trademark Office is hereby directed to the document listed on the attached form PTO-1449. It is respectfully requested that the document be expressly considered during the prosecution of this application, and that the document be made of record therein and appear among the "References Cited" on any patent to issue therefrom.

This Information Disclosure Statement is being filed within three months of the U.S. filing date OR before the mailing date of a first Office Action on the merits. No certification or fee is required.

*y* **4** √3 09/939,789

Please charge any shortage in fees due in connection with the filing of this paper, including extension of time fees, to Deposit Account and please credit any excess fees to such deposit account.

Respectfully submitted,

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Facsimile: 202.756.8087 **Date: January 19, 2005** 

Please recognize our Customer No. 20277 as our correspondence address.



SHEET <u>1</u> OF <u>1</u>

INFORMATION DISCLOSURE CITATION IN AN APPLICATION					ATTY. DOCKET NO. 50023-148		SERIAL NO. <b>09/939,789</b>		
					APPLICANT Eiji UEDA				
(PTO-1449)					FILING DATE August 28, 200	FILING DATE GROUP August 28, 2001 2611			
			U	.S. PATEN	NT DOCUMENTS				
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<sup>\*</sup>EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

1 Applicant's unique citation designation number (optional). 2 Applicant is to place a check mark here if English language Translation is attached.